## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10823186

| CLAIMS AS FILED - F   |  |                     |               |                    | SMALL ENTITY |                                  |      |                    |               | OTHE     | OTHER THAN         |               |  |
|---|--|---------------------|---------------|--------------------|--------------|----------------------------------|------|--------------------|---------------|----------|--------------------|---------------|--|
| TOTAL CLAIMS  |  |                     |               | (Column 1)         |              | (Column 2)                       |      | TYPE               |               | OF       |                    | SMALL ENTITY  |  |
|   |  |                     | 1             | 23                 |              |                                  | 1    | RATE               | FEE           |          | RATE               | FEE           |  |
| FOR   |  |                     | NUMBE         | NUMBER FILED       |              | NUMBER EXTRA                     |      | BASIC F            | EE 385.0      | 00 OF    | BASIC FE           | F 770.00      |  |
| TOTAL CHARGEABLE CLAIMS   |  |                     | 23 n          | 23 minus 20=       |              | * 3                              |      | X\$ 9=             | :             | OF       | X\$18=             | 54            |  |
| INDEPENDENT CLAIMS  |  |                     |               | 4 minus 3 =        |              |                                  |      | X43=               |               | OR       | X86=               |               |  |
| М   | ULTIPLE DEPE                                   | ENDENT CLAIM        | PRESENT       | IESENT             |              |                                  |      | +145=              | 1             | 7        |                    | 86            |  |
| *   | f the differenc                                | e in column 1 is    | s less than   | zero, enter        | "0" in (     | column 2                         |      | TOTAL              | <del></del>   | OR       |                    |               |  |
|   |  | CLAIMS AS           | AMENDE        | MENDED - PART II   |              |                                  |      | IOIAL              | ·             | OR       |                    | 410           |  |
|   |  | (Column 1)          |               | (Colum             | nn 2)        | (Column 3)                       |      | SMALL              | ENTITY        | OR       | OTHER<br>SMALL     |               |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING |               | HIGHE              |              | PRESENT                          | 1 [  |                    | ADDI-         |          |                    | ADDI-         |  |
|   |  | AFTER<br>AMENDMENT  |               | PREVIO<br>PAID F   |              | EXTRA                            |      | RATE               | TIONA<br>FEE  | <u> </u> | RATE               | TIONAL<br>FEE |  |
|   | Total  | * .                 | Minus         | **                 |              | =                                |      | ·X\$ 9=            |               | OR       | X\$18≃             |               |  |
| AME   | Independent                                    | *<br>ENTATION OF M  | Minus         | ***                | <u> </u>     | =                                | Ī    | X43=               |               | OR       | X86=               |               |  |
|   | [ · iii.o · i ii.zo.                           | LIVIATION OF W      | OLTIPLE DE    | PENDENT            | CLAIM        |                                  |      | +145=              |               | 7        | +290=              |               |  |
| 1/1/  |  |                     |               |                    |              |                                  |      | TOTAL              | <del> </del>  | OR       | TOTAL              |               |  |
|   |  | (Column 1)          |               | (Cal               |              | •                                | A    | DDIT. FEE          |               | OR       | ADDIT. FEE         |               |  |
|   |  | CLAIMS              |               | (Colum<br>HIGHE    |              | (Column 3)                       | _    |                    | _             |          |                    |               |  |
| 8   |  | REMAINING<br>AFTER  |               | NUMBI              |              | PRESENT                          | - [  | DATE               | ADDI-         |          |                    | ADDI-         |  |
|   |  | AMENDMENT           |               | PREVIOU<br>PAID FO |              | EXTRA                            |      | RATE               | TIONAL<br>FEE |          | RATE               | TIONAL<br>FEE |  |
| AMENDMENT   | Total  | *                   | Minus         | **                 |              | =                                |      | X\$ 9=             |               | OR       | X\$18=             | FEE           |  |
| A ME  | Independent                                    | *                   | Minus         | ***                |              | =                                | r    | X43=               |               | 1 1      |                    |               |  |
|   | FIRST PRESE                                    | NTATION OF MU       | JLTIPLE DEI   | PENDENT C          | LAIM         |                                  | ┢    | A40=               |               | OR       | X86=               |               |  |
|   |  |                     |               |                    |              |                                  | L    | +145=              |               | OR       | +290=              | •             |  |
|   |  |                     |               |                    |              |                                  | ΑĮ   | TOTAL<br>DDIT. FEE |               | OR ,     | TOTAL<br>DDIT. FEE |               |  |
| _   |  | (Column 1)          |               | (Column            |              | (Column 3)                       |      |                    |               |          |                    |               |  |
|   |  | REMAINING           |               | HIGHES<br>NUMBE    |              | PRESENT                          | Г    |                    | ADDI-         | ] Г      | -                  | ADDI-         |  |
|   |  | AFTER<br>AMENDMENT  |               | PREVIOU<br>PAID FO |              | EXTRA                            |      | RATÉ               | TIONAL<br>FEE |          | RATE               | TIONAL        |  |
|   | Total  | *                   | Minus         | ##                 |              | =                                |      | X\$ 9=             | <u> </u>      | OR       | X\$18=             | FEE           |  |
|   | Independent                                    |                     | Minus         | ***                |              | =                                | -    |                    |               |          |                    |               |  |
| <u>. 1</u> 1  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                     |               |                    |              |                                  |      | X43=               |               | OR       | X86=               |               |  |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |                     |               |                    |              |                                  |      | 145=               |               | OR       | +290=              |               |  |
| If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  TOTAL ADDIT. FEE  ADDIT. FEE  OR ADDIT. FEE |  |                     |               |                    |              |                                  |      |                    |               |          |                    |               |  |
| TI  | ne *Highest Num                                | ber Previously Paid | For (Total or | Independent)       | iss than it  | ತ, enter "3."<br>ighest number f | ound | in the app         | ropriate box  | in colur | nn 1.              |               |  |